



Bib Data Sheet

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APPLICANTS

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** CONTINUING DATA **

This application is a CIP of 09/673,406 03/29/2002
which is a 371 of PCT/US99/08207 04/15/1999

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** FOREIGN APPLICATIONS **

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** SMALL ENTITY **

** 01/19/2001

Foreign Priority claimed yes <input checked="" type="checkbox"/> no <input type="checkbox"/>	STATE OR COUNTRY MN	SHEETS DRAWING 16	TOTAL CLAIMS 27	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Verified and Acknowledged Examiner's Signature _____ Initials _____			

ADDRESS

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TITLE

SMOKE EVACUATION SYSTEM

FILING FEE RECEIVED 1027	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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